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CONFIRMATION NO. 2451

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/627,366 | <b>FILING OR 371(c)<br/>DATE</b><br>07/24/2003<br><b>RULE</b> | <b>CLASS</b><br>370 | <b>GROUP ART UNIT</b><br>2416 | <b>ATTORNEY<br/>DOCKET NO.</b><br>CISCP091C1 |
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/23/2004

|   |                                   |                                 |                               |                                     |
|---|-----------------------------------|---------------------------------|-------------------------------|-------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR<br/>COUNTRY</b><br>CA | <b>SHEETS<br/>DRAWING</b><br>10 | <b>TOTAL<br/>CLAIMS</b><br>57 | <b>INDEPENDENT<br/>CLAIMS</b><br>13 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                                 |                               |                                     |
| Verified and Acknowledged   | Examiner's Signature              | Initials                        |                               |                                     |

## ADDRESS

22434

## TITLE

MOBILE IP INTRA-AGENT MOBILITY

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|--|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>2256 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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